

## CITY OF CENTENNIAL SALES TAX RETURN

A RETURN IS REQUIRED  
EVEN IF NO TAX IS DUE

Taxpayer Name:

Filing Period:

Location Address:

Due Date: (20th of the month  
following the end of the reporting  
period)

City, State, Zip

Centennial License No:

1.	<b>GROSS SALES AND SERVICE</b> (Total receipts from City activity must be reported and accounted for in every return including sales, rentals and leases and all services both taxable and non-taxable)					5.	<b>AMOUNT OF CITY SALES TAX</b> (Line 4 x 2.5%)				
2.	A. <b>ADD: BAD DEBTS COLLECTED</b>					6.	<b>ADD: EXCESS TAX COLLECTED</b>				
	B. <b>TOTAL</b> (Add Lines 1 and 2A)					7.	<b>ADJUSTED CITY SALES TAX</b> (Add Lines 5 and 6)				
3.	A. <b>NON-TAXABLE SERVICE SALES</b>					8.	<b>DEDUCT VENDOR ALLOWANCE IF PAID BY DUE DATE</b> (Line 7 x 3%) Maximum Allowance = \$200 Minimum Allowance = \$3.00				
	B. <b>SALES TO OTHER LICENSED DEALERS FOR RESALE</b>					9.	<b>TOTAL TAX DUE</b> (Line 7 minus line 8)				
	C. <b>SALES SHIPPED OUT OF CENTENNIAL</b>					10.	<b>LATE FILING - IF FILED AFTER DUE DATE ADD:</b> (a) PENALTY = GREATER OF \$15 OR 15% ON TAX DUE (Line 9) (b) INTEREST = 1.5% PER MONTH ON TAX DUE (Line 9 x 1.5%)				
	D. <b>BAD DEBTS CHARGED OFF</b>					11.	<b>TOTAL TAX, PENALTY, AND INTEREST DUE</b> (Add lines 9 and 10(a) and 10(b))				
	E. <b>TRADE-INS FOR TAXABLE RESALE</b>					12.	A. <b>ADD: (PRIOR PERIOD ADJUSTMENT)</b>				
	F. <b>SALES OF GASOLINE AND CIGARETTES</b>						B. <b>DEDUCT: (PRIOR PERIOD ADJUSTMENT)</b>				
	G. <b>SALES TO GOV'T, RELIGIOUS, AND CHARITABLE ORG.</b>					13.	<b>TOTAL DUE AND PAYABLE</b> If this amount is \$10 or less, you may record the amount due and carry the amount forward for payment on a future return when the threshold of \$10 has been reached.				
	H. <b>RETURNED GOODS</b>					<b>MAKE CHECK OR MONEY ORDER PAYABLE TO: CITY OF CENTENNIAL</b>					
	I. <b>PRESCRIPTION DRUGS / PROSTHETIC DEVICES</b>										
	J. <b>FOOD</b>										
	K. <b>OTHER DEDUCTIONS (LIST)</b>										
	L. <b></b>										
	M. <b>TOTAL DEDUCTIONS</b> (Total of Lines 3A through 3L)										
4.	<b>NET TAXABLE SALES &amp; SERVICE</b> (Subtract line 3M from 2B)										

## SCHEDULE A - SPECIAL MESSAGE TO / FROM THE CITY

SCHEDULE B			SCHEDULE C-CONSOLIDATED ACCOUNTS				
DO NOT COMPLETE THIS SECTION - NOT CURRENTLY IN USE BY THE CITY OF CENTENNIAL			This schedule is required in all cases in which the taxpayer makes a consolidated return which includes sales made at more than one location. It must be completely filled out and convey all information required in accordance with the column headings. If additional space is needed attach schedule in same format. Attach a supporting schedule that details lines 1, 2, 3, and 4 on Schedule A for each location.				
			CENTENNIAL LICENSE NO	BUSINESS LOCATION ADDRESS	PERIOD'S TOTAL GROSS SALES		PERIOD'S NET TAXABLE SALES
ENTER TOTAL HERE AND IN LINES 1 AND 4 ABOVE			LINE 1		LINE 4		
NEW BUSINESS DATE:			<input type="checkbox"/> CHANGE OF LOCATION ADDRESS		<input type="checkbox"/> CHANGE OF MAILING ADDRESS		
MONTH	DAY	YEAR	Address 1:		Address 1:		
			Address 2:		Address 2:		
DISCONTINUED DATE:			City/State/Zip:		City/State/Zip:		
MONTH	DAY	YEAR	Phone:		Phone:		
			Contact Person:		Contact Person:		

I HEREBY CERTIFY UNDER PENALTY OF PERJURY, THAT THE STATEMENTS MADE HEREIN ARE, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT.

Signature:		Date:	
Printed Name:	Title:	Phone:	Email:

PLEASE REMIT TO: CITY OF CENTENNIAL, REMITTANCE CENTER, P.O. BOX 17383, DENVER, CO 80217-0383  
FOR QUESTIONS, PLEASE VISIT OUR WEBSITE AT [www.centennialcolorado.com](http://www.centennialcolorado.com) OR CALL 303.325.8000